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CONFIRMATION NO. 5187

SERIAL NUMBER 10/526,377	FILING OR 371(c) DATE 03/03/2005 RULE	CLASS 514	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. Q86591	
APPLICANTS Naomichi Furudate, Itabashi-ku, JAPAN; Mitsuru Shimoyama, Ibaraki-ku, JAPAN;					
** CONTINUING DATA ***** This application is a 371 of PCT/JP03/11211 09/02/2003 <i>yes JS 9/5/07</i>					
** FOREIGN APPLICATIONS ***** JAPAN 2002-258019 09/03/2002 <i>yes JS 9/5/07</i>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 6
ADDRESS 23373					
TITLE Hypogastric and/or perineal pain-relieving agent					
FILING FEE RECEIVED 1500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		